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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Taduesz First name Middle name Lekarczyk Last name and Suffix (Sr., Jr., II, III)	Maria First name Middle name Lekarczyk Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6537	xxx-xx-3269

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Debtor 1 Taduesz Lekarczyk
Debtor 2 Maria Lekarczyk

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)			
		LIIVS			
Where you live	5325 W. 89th St.	If Debtor 2 lives at a different address:			
	Oak Lawn, IL 60453 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
	Cook				
	County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINs Where you live 5325 W. 89th St. Oak Lawn, IL 60453 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.			

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De	btor 2 Maria Lekarczyk				Case number (if known)	
Pa	Tell the Court About	Your Bankruptc	y Case			
7.	The chapter of the Bankruptcy Code you are			n of each, see <i>Notice Required by</i> of page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Ban e box.	kruptcy
	choosing to file under	Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		☐ Chapter 13				
8.	How you will pay the fee	■ I will pay	, the entire fee wh	an I file my natition. Disease shoot	Lywith the plant's office in your lead court for me	
0.	now you will pay the fee	about ho order. If	w you may pay. Ty	pically, if you are paying the fee yo	k with the clerk's office in your local court for mourself, you may pay with cash, cashier's check, alf, your attorney may pay with a credit card or control of the control	or money
				stallments. If you choose this option (Official Form 103A).	on, sign and attach the Application for Individual	ls to Pay
		☐ I reques but is not applies to	t that my fee be w t required to, waive o your family size a	vaived (You may request this option e your fee, and may do so only if your and you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a ju ur income is less than 150% of the official pove n installments). If you choose this option, you m rial Form 103B) and file it with your petition.	rty line that
9.	Have you filed for bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.				
		Dist	rict	When	Case number	
		Dist	rict	When	Case number	
		Dist	rict	When	Case number	
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Deb	otor		Relationship to you	
		Dist	rict	When	Case number, if known	
		Deb	otor		Relationship to you	
		Dist	rict	When	Case number, if known	
11.	Do you rent your	■ No. Go	to line 12.			
	residence?		as your landlord ob	tained an eviction iudament agains	t you and do you want to stay in your residence	?
		Li res.		, , ,	.,	
					Judgment Against You (Form 101A) and file it w	vith this
			bankruptcy pe		g	

Debtor 1 Taduesz Lekarczyk

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Deb	otor 2 Maria Lekarczyk				Case number (if known)	
Par	Report About Any Bu	sinesses	You Own	as a Sole Proprie	etor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	ate & ZIP Code	
	it to this petition.		Check	the appropriate bo	ox to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	al Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in	dicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure	
	For a definition of small	■ No.	I am n	ot filing under Chap	pter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	/ Hazardo	us Property or An	ny Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				_
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to	— 103.	What is t	he hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?		
					Number, Street, City, State & Zip Code	
						$\overline{}$

Taduesz Lekarczyk

Debtor 1

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Debtor 1 Taduesz Lekarczyk Debtor 2 Maria Lekarczyk

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-16791 Doc 1 Filed 05/18/16 Entered 05/18/16 15:30:58 Desc Main Document Page 6 of 62

	tor 1	Taduesz Lekarczyk Maria Lekarczyk		Document	Case number	er (if known)			
Part	t 6·	Answer These Questi	ons for Re	enorting Purnoses		<u> </u>			
		t kind of debts do	16a.	· · · · · · · · · · · · · · · · · · ·	mer debts? Consumer debts are def	ined in 11 U.S.C. § 101(8) as "incurred by an			
		you have?		individual primarily for a personal, family, or household purpose."					
				☐ No. Go to line 16b.					
				Yes. Go to line 17.					
			16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
				☐ No. Go to line 16c.					
				☐ Yes. Go to line 17.					
			16c.	State the type of debts you owe th	at are not consumer debts or busines	ss debts			
17.		you filing under pter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.				
	after	rou estimate that rany exempt perty is excluded and	Yes.		u estimate that after any exempt prope e to distribute to unsecured creditors	perty is excluded and administrative expenses ?			
		administrative expenses are paid that funds will be available for distribution to unsecured creditors?		■ No					
be dis	be a			Yes					
18.		How many Creditors do you estimate that you owe?	1 -49		1,000-5,000	<u> </u>			
			☐ 50-99		☐ 5001-10,000 ☐ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000			
			☐ 100-19 ☐ 200-99		10,001-23,000	in wore than 100,000			
19.		low much do you	□ \$0 - \$9	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
		nate your assets to orth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.		much do you	□ \$0 - \$9	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estir to be	nate your liabilities e?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
Part	. 7.	Sign Below		•					
	you	Olgii Below	I have ex	amined this petition, and I declare u	under penalty of perjury that the infor	mation provided is true and correct			
	you								
					available under each chapter, and I cl	, under Chapter 7, 11,12, or 13 of title 11, hoose to proceed under Chapter 7.			
				rney represents me and I did not pa t, I have obtained and read the noti	y or agree to pay someone who is not ce required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this			
			I request	relief in accordance with the chapte	er of title 11, United States Code, spe	ecified in this petition.			
				cy case can result in fines up to \$25		or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			/s/ Tadu	esz Lekarczyk	/s/ Maria Lekaro				
				z Lekarczyk e of Debtor 1	Maria Lekarczyk Signature of Debto				
			Executed	May 5, 2016 MM / DD / YYYY		ay 5, 2016 1/DD/YYYY			

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Debtor 1	Taduesz Lekarczyk	Document		
Debtor 2	Maria Lekarczyk	•	Case	e number (if known)
•	attorney, if you are ted by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ted States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)
	not represented by ey, you do not need s page.			ledge after an inquiry that the information in the
		/s/ Michael J. Worwag Signature of Attorney for Debtor	Date	May 5, 2016 MM / DD / YYYY
		Michael J. Worwag		
		Worwag & Malysz, P.C.		
		The Peoples Advocates 2500 E. Devon Ave #300 Des Plaines, IL 60018 Number, Street, City, State & ZIP Code		
		Contact phone 847.954.2350 #6256887	Email address	mjworwag@gmail.com

Bar number & State

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		Doddiii	T 44C C C C C	
Fill in this infor	mation to identify your	case:		
Debtor 1	Taduesz Lekarczy	rk		
	First Name	Middle Name	Last Name	
Debtor 2	Maria Lekarczyk			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

ı aı	t1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	160,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	17,500.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	177,500.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	305,354.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	52,708.22
	Your total liabilities	\$	358,062.22
Par	t3: Summarize Your Income and Expenses	-	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,000.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,977.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	hedules.
7.	Yes What kind of debt do you have?		

Official Form 106Sum

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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		Document	raye 3 01 02	
Debtor 1	Taduesz Lekarczyk		3	
Debtor 2	Maria Lekarczyk		Case number (if known)	

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 1,604.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case	e 16-1679	1 Doc 1		05/18/16 ument	Entered 05/18/ Page 10 of 62	16 15:30	:58 De	sc Main	
Fill	in this informat	tion to identify	your case and th							
Deb	otor 1	Taduesz Lek		le Name		Last Name				
		Maria Lekaro First Name		le Name		Last Name				
Unit	ted States Bankr	uptcy Court for	the: NORTHER	RN DIST	RICT OF ILLIN	IOIS				
Cas	se number					-			☐ Check if the amended	
	ficial Forn		_							12/15
n ea hink nfor	ch category, sepa	arately list and d s complete and pace is needed,	escribe items. List accurate as possib	le. If two	married people	n asset fits in more than or are filing together, both ar a top of any additional page	e equally resp	onsible for su	pplying correct	•
Part	1: Describe Eac	ch Residence, B	uilding, Land, or Ot	ther Real	Estate You Ow	n or Have an Interest In				
. D	o you own or have	e any legal or eq	juitable interest in a	any resid	ence, building,	land, or similar property?				
	No. Go to Part 2.									
	Yes. Where is the	e property?								
1.1				What	is the property	? Check all that apply				
	5325 W. 89th				Single-family h	ome	Do not ded	uct secured cla	aims or exemption	s. Put
	Street address, if av	ailable, or other des	scription		Duplex or mult Condominium	=			d claims on Sched ns Secured by Pro	
	Oak Lawn	IL	60453-0000		Manufactured Land	or mobile home	Current va entire prop		Current value portion you ov	
	City	State	ZIP Code		Investment pro	pperty	\$16	50,000.00	\$160,	,000.00
					Timeshare Other		(such as fe	ee simple, ten	our ownership ir ancy by the entir	
				Who		in the property? Check one	a life estat	e), if known.		
	Cook				Debtor 2 only					
	County				Debtor 1 and [Debtor 2 only	.			
						the debtors and another		c if this is constructions)	nmunity property	
					information your	ou wish to add about this ite on number:	em, such as lo	cal		

pages you have attached for Part 1. Write that number here.....=>

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

\$160,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Debte		i aduesz Lekarczyk Maria Lekarczyk		Case number (if known)	
3. Ca	rs, vans	s, trucks, tractors, sport utili	ty vehicles, motorcycles		
_	·	,,,	, ,		
	Yes				
0.4		Toyota	What has a state of the same o	Do not deduct sec	ured claims or exemptions. Put
3.1	Make:	Toyota Corolla	Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model: Year:	2013	Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
			Debtor 2 only	Current value of t	
		imate mileage: nformation:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Othern	ilomation.	At least one of the debtors and another		
			Check if this is community property (see instructions)	\$10,000	9.00 \$10,000.00
3.2	Make:	Mercedes Benz	Who has an interest in the property? Check one		ured claims or exemptions. Put secured claims on Schedule D:
	Model:	350	☐ Debtor 1 only		ve Claims Secured by Property.
	Year:	1991	Debtor 2 only	Current value of t	the Current value of the
	Approx	imate mileage: 280,00	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other is	nformation:	At least one of the debtors and another		
				\$1,500	0.00 \$1,500.00
			LI Check if this is community property (see instructions)	φ1,500	5.00 \$1,500.00
			u own for all of your entries from Part 2, including		\$11,500.00
	_				
		ribe Your Personal and Househ			
Do y	ou own	or have any legal or equitab	le interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> >	kamples No	d goods and furnishings Major appliances, furniture, li escribe	nens, china, kitchenware		
		Household (Soods, Used Furniture and Personal Electronic	os	\$3,500.00
		<u> </u>			
	ectronic kamples		o, video, stereo, and digital equipment; computers, pr as, media players, games	rinters, scanners; music c	ollections; electronic devices
	No Yes. D	escribe			
E)		es of value Antiques and figurines; painti other collections, memorabili	ngs, prints, or other artwork; books, pictures, or othe a, collectibles	er art objects; stamp, coin,	or baseball card collections;
		escribe			

Official Form 106A/B Schedule A/B: Property

Case 16-16791 Doc 1 Filed 05/18/16 Entered 05/18/16 15:30:58 Desc Main Document Page 12 of 62 Debtor 1 Taduesz Lekarczyk Debtor 2 Maria Lekarczyk Case number (if known) 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$1,000.00 Used Personal Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$500.00 Costume Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5,000.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

Institution name:

PNC Bank

Schedule A/B: Property

□ No

Yes.....

Official Form 106A/B

\$1,000.00

17.1. Checking

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D	ebtor 2	Maria Lekarczyk			Case number (if known)	
18.	Examp	mutual funds, or publicly tradectles: Bond funds, investment accou		ge firms, money market accounts		
	■ No □ Yes	Institution	n or issuer name	5		
19.	Non-pu joint ve ■ No	•	in incorporate	d and unincorporated businesse	s, including an interest in	an LLC, partnership, and
	☐ Yes.	Give specific information about the Name of enti			% of ownership:	
20.	Negotia	able instruments include personal o	checks, cashiers	e and non-negotiable instrument checks, promissory notes, and mo to someone by signing or deliverin	oney orders.	
	☐ Yes. 0	Give specific information about the Issuer name				
21.		nent or pension accounts les: Interests in IRA, ERISA, Keogl	n, 401(k), 403(b)	, thrift savings accounts, or other p	ension or profit-sharing plan	s
	☐ Yes. I	ist each account separately. Type of accoun	t:	Institution name:		
22.	Your sh			you may continue service or use fro c utilities (electric, gas, water), telec		or others
				Institution name or individual:		
23.	Annuiti No	es (A contract for a periodic payme	ent of money to	you, either for life or for a number o	f years)	
	☐ Yes	Issuer name and de	scription.			
24.		s in an education IRA, in an acco C. §§ 530(b)(1), 529A(b), and 529(l		ed ABLE program, or under a qu	alified state tuition progra	m.
	☐ Yes	Institution name and	description. Sep	parately file the records of any inter-	ests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or future interests in p	property (other	than anything listed in line 1), and	d rights or powers exercis	able for your benefit
	☐ Yes.	Give specific information about the	em			
26.	Examp ■ No	s, copyrights, trademarks, trade seles: Internet domain names, websi	tes, proceeds fro	ner intellectual property om royalties and licensing agreeme	nts	
27.		es, franchises, and other general				
	Examp ■ No		nses, cooperativ	ve association holdings, liquor licen	ses, professional licenses	
M	oney or p	property owed to you?				Current value of the
						portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you				
	_	Give specific information about the	m, including whe	ether you already filed the returns a	nd the tax years	

Schedule A/B: Property Official Form 106A/B page 4

	Case 16-16791	Doc 1	Filed 05/18/16 Document	Entered 05/18/16 15:30:58 Page 14 of 62	Desc Main			
Debtor 1 Debtor 2	Taduesz Lekarczyk Maria Lekarczyk			Case number (if known)				
■ No			usal support, child suppo	ort, maintenance, divorce settlement, property	settlement			
Exam _p ■ No	amounts someone owes yoles: Unpaid wages, disabili benefits; unpaid loans Give specific information	ty insurance		efits, sick pay, vacation pay, workers' comper	nsation, Social Security			
31. Interes	ets in insurance policies oles: Health, disability, or life	e insurance; ł	nealth savings account (F	HSA); credit, homeowner's, or renter's insurar	nce			
	Name the insurance compa Com	any of each popany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:			
If you a some o	32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No □ Yes. Give specific information							
Examp ■ No —	against third parties, wholes: Accidents, employment			t or made a demand for payment to sue				
■ No	contingent and unliquidat Describe each claim	ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims			
■ No	nancial assets you did not Give specific information	already list						
				ny entries for pages you have attached	\$1,000.00			
Part 5: De	scribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.				
No. Go	own or have any legal or equi to Part 6. Go to line 38.	itable interest	in any business-related pr	operty?				
	scribe Any Farm- and Commo			n or Have an Interest In.				
■ No.	own or have any legal or Go to Part 7. Go to line 47.	r equitable in	nterest in any farm- or c	ommercial fishing-related property?				

Official Form 106A/B Schedule A/B: Property page 5

Describe All Property You Own or Have an Interest in That You Did Not List Above

Part 7:

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Debto	or 1 Taduesz Lekarczyk	3.5		
Debto	or 2 Maria Lekarczyk		Case number (if known)	
	o you have other property of any kind you did not already list? ixamples: Season tickets, country club membership No	,		
	Yes. Give specific information			
54. <i>I</i>	Add the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55. F	Part 1: Total real estate, line 2			\$160,000.00
56. F	Part 2: Total vehicles, line 5	\$11,500.00		
57. F	Part 3: Total personal and household items, line 15	\$5,000.00		
58. F	Part 4: Total financial assets, line 36	\$1,000.00		
59. F	Part 5: Total business-related property, line 45	\$0.00		
60. F	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. F	Part 7: Total other property not listed, line 54 +	\$0.00		
62. 1	Total personal property. Add lines 56 through 61	\$17,500.00	Copy personal property to	stal \$17,500.00
63. 1	Fotal of all property on Schedule A/B. Add line 55 + line 62			\$177,500.00

Official Form 106A/B Schedule A/B: Property page 6

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		D O O O O I I I I	1 446 1 61 62	
Fill in this infor	mation to identify your	case:		
Debtor 1	Taduesz Lekarczy	'k		
	First Name	Middle Name	Last Name	
Debtor 2	Maria Lekarczyk			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
,				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Specific laws that allow exemption Check only one box for each exemption.
5325 W. 89th St. Oak Lawn, IL 60453 Cook County Line from <i>Schedule A/B</i> : 1.1	\$160,000.00	\$30,000.00 735 ILCS 5/12-901 100% of fair market value, up to any applicable statutory limit
2013 Toyota Corolla Line from <i>Schedule A/B</i> : 3.1	\$10,000.00	\$4,800.00 T35 ILCS 5/12-1001(c) 100% of fair market value, up to any applicable statutory limit
1991 Mercedes Benz 350 280,000 miles Line from <i>Schedule A/B</i> : 3.2	\$1,500.00	\$1,500.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit
Household Goods, Used Furniture and Personal Electronics Line from <i>Schedule A/B</i> : 6.1	\$3,500.00	\$3,500.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit
Used Personal Clothing Line from Schedule A/B: 11.1	\$1,000.00	\$1.00 Table 1.00 Table 1.00 Table 1.00% of fair market value, up to any applicable statutory limit Table 1.00

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	ebtor 2 Maria Lekarczyk			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Checking: PNC Bank Line from Schedule A/B: 17.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
	Line IIom Schedule AVB. 17.1	100% of fair market value, up to any applicable statutory limit				
3.	Are you claiming a homestead exemptio (Subject to adjustment on 4/01/19 and ever			led on or after the date of adjustme	nt.)	
	No					
	☐ Yes. Did you acquire the property cover	ered by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No					
	□ Yes					

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		Document	Page 18	of 62		
Fill in this informat	tion to identify you	ır case:				
Debtor 1	Taduesz Lekarcz	zyk Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	Maria Lekarczyk	Middle Name	Last Name			
United States Bankr	ruptcy Court for the:	NORTHERN DISTRICT OF ILLI	NOIS			
Case number					_	if this is an
00000	4000				ameno	ed filing
Official Form [·] Schedule D		Who Have Claims S	Secured	by Propert	у	12/15
		If two married people are filing togethe out, number the entries, and attach it to				
1. Do any creditors ha	ve claims secured by	v vour property?				
	•	his form to the court with your other s	schedules. Yo	ou have nothing else t	o report on this form.	
_	l of the information	•				
	Secured Claims	below.				
		more then one accured claim, list the grad	itor congrately	Column A	Column B	Column C
for each claim. If more	than one creditor has	more than one secured claim, list the cred s a particular claim, list the other creditors cal order according to the creditor's name	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Toyota Moto	r Credit	Describe the property that secures th	e claim:	\$7,833.00	\$0.00	\$7,833.00
Creditor's Name		Automobile				
1111 W 22nd Oak Brook, I		As of the date you file, the claim is: C apply. Contingent	heck all that			
Number, Street, Cit	ty, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only Debtor 2 only		☐ An agreement you made (such as m car loan)		ured		
Debtor 1 and Debto	•	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
☐ At least one of the c☐ Check if this claim community debt		☐ Judgment lien from a lawsuit☐ Other (including a right to offset)				
·	Opened 2/18/13 Last Active					
Date debt was incurre	ed 4/28/16	Last 4 digits of account number	er <u>0001</u>			
2.2 Toyota Moto	r Credit	Describe the property that secures the	ie claim:	\$7,833.00	\$10,000.00	\$0.00
Ordanor o Harrio		2013 Toyota Corolla				
1111 W 22nd Oak Brook, I		As of the date you file, the claim is: C apply. Contingent	heck all that			
	ty, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as m car loan)	ortgage or sec	ured		
■ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			

☐ Judgment lien from a lawsuit

☐ At least one of the debtors and another

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Debtor 1 Taduesz Lekarczyk		Case number (if know)					
First Name Middle Na	ime Last Name						
Debtor 2 Maria Lekarczyk							
First Name Middle Na	ime Last Name						
☐ Check if this claim relates to a community debt	Other (including a right to offset)						
Date debt was incurred 2/18/13	Last 4 digits of account number 000	01					
2.3 Wells Fargo Hm Mortgag	Describe the property that secures the claim:	\$144,844.00	\$0.00	\$144,844.00			
Creditor's Name	FHA Real Estate Mortgage						
0.400 04	As of the date you file, the claim is: Check all that						
8480 Stagecoach Cir Frederick, MD 21701	apply. Contingent						
Number, Street, City, State & Zip Code	☐ Unliquidated						
	☐ Disputed						
Who owes the debt? Check one.	Nature of lien. Check all that apply.						
■ Debtor 1 only	An agreement you made (such as mortgage or	secured					
Debtor 2 only	car loan)						
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)					
☐ At least one of the debtors and another☐ Check if this claim relates to a	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)						
community debt	Other (including a right to onset)						
Opened 6/29/09 Last Active Date debt was incurred 4/01/16	Last 4 digits of account number 549	<u> 5</u>					
Wolls Fargo Homo							
2.4 Wells Fargo Home Mortgage	Describe the property that secures the claim:	\$144,844.00	\$160,000.00	\$0.00			
Creditor's Name	5325 W. 89th St. Oak Lawn, IL 60453 Cook County						
8480 Stagecoach Circle Frederick, MD 21701	As of the date you file, the claim is: Check all that apply.						
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated						
, , , , , , , , , , , , , , ,	☐ Disputed						
Who owes the debt? Check one.	Nature of lien. Check all that apply.						
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured					
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
At least one of the debtors and another	☐ Judgment lien from a lawsuit						
☐ Check if this claim relates to a community debt	Other (including a right to offset)						
Date debt was incurred 4/1/16	Last 4 digits of account number 549	95					
Add the dollar value of your entries in Co	olumn A on this page. Write that number here:	\$305,354.0	00				
If this is the last page of your form, add the Write that number here:	the dollar value totals from all pages.	\$305,354.0					

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill in th	is information to identify your cas	e:		
Debtor 1	. aaaee = e.i.a. e= j ii			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if,	mana Lonarozyn	Middle Name	Last Name	
United S	tates Bankruptcy Court for the: N	ORTHERN DISTRICT OF ILL	LINOIS	
Case nu (if known)	mber			Check if this is an amended filing
Officia	I Form 106E/F			
	lule E/F: Creditors Who	Have Unsecured	Claims	12/15
Schedule Schedule left. Attacl name and	G: Executory Contracts and Unexpired D: Creditors Who Have Claims Secured the Continuation Page to this page. If case number (if known).	Leases (Official Form 106G). D by Property. If more space is a you have no information to rep	st executory contracts on Schedule A/B: Property (Office on the include any creditors with partially secured claim: needed, copy the Part you need, fill it out, number the eleport in a Part, do not file that Part. On the top of any add	s that are listed in ntries in the boxes on the
Part 1:	List All of Your PRIORITY Unsec			
	ny creditors have priority unsecured cl	aims against you?		
	o. Go to Part 2.			
□ Ye				
Part 2:	List All of Your NONPRIORITY U			
3. Do ai	ny creditors have nonpriority unsecure	d claims against you?		
□ N	b. You have nothing to report in this part.	Submit this form to the court with	your other schedules.	
■ Ye	es.			
unse	cured claim, list the creditor separately for one creditor holds a particular claim, list the	each claim. For each claim listed	e creditor who holds each claim. If a creditor has more the didentify what type of claim it is. Do not list claims already in lave more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
				Total claim
4.1	Advocate Christ Medical Center	Last 4 digits of acco	ount number	\$104.78
I	Nonpriority Creditor's Name PO Box 3039	When was the debt	incurred?	_
	Hinsdale, IL 60522 Number Street City State Zlp Code	As of the date you f	ile, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or the date you .	ine, the starm is: Oncok an that apply	
ı	Debtor 1 only	☐ Contingent		
ı	Debtor 2 only	☐ Unliquidated		
ı	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and anothe	_ '	ITY unsecured claim:	
	☐ Check if this claim is for a commun	□ .		
(lebt	☐ Obligations arisin	g out of a separation agreement or divorce that you did not	
	s the claim subject to offset?	report as priority clair		
	No	•	or profit-sharing plans, and other similar debts	
I	☐Yes	Other. Specify	Medical Bills	_

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	r 1 Taduesz Lekarczyk r 2 <u>Maria Lekarczyk</u>		Case number (if know)	
4.2	Amex	Last 4 digits of account number	1013	\$3,588.00
	Nonpriority Creditor's Name	_		
	Po Box 297871 Fort Lauderdale, FL 33329	When was the debt incurred?	Opened 4/24/13	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card		
4.3	Amex	Last 4 digits of account number	1113	\$2,450.00
	Nonpriority Creditor's Name			ΨΣ, 100.00
	Po Box 297871	When was the debt incurred?	Opened 9/29/13	
	Fort Lauderdale, FL 33329 Number Street City State Zlp Code	As of the date you file, the claim i	s. Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	5. Спеск ан тат арргу	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
		☐ Student loans	· Oldini.	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.4	Archer Family Medical Group	Last 4 digits of account number		\$143.28
	Nonpriority Creditor's Name 6649 W. ARcher Ave	When was the debt incurred?		
	Chicago, IL 60638	when was the dept incurred:		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bills	S	

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	2 Maria Lekarczyk		Case number (if know)	
4.5	Bank Of America	Last 4 digits of account number	7764	\$1,883.00
	Nonpriority Creditor's Name Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 8/06/13	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.6	Cach LLC Nonpriority Creditor's Name	Last 4 digits of account number	9220	\$3,595.00
	4340 S Monaco Second Floor Denver, CO 80237	When was the debt incurred?	Opened 1/21/15	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debts	
		· ·	• •	
	☐ Yes	Other. Specify Collection F	iith Third Bank	
4.7	Capital One Bank Usa Nonpriority Creditor's Name	Last 4 digits of account number	6292	\$2,363.00
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 12/13/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card		

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	1 Taduesz Lekarczyk ² Maria Lekarczyk		Case number (if know)	
4.8	Chase Card	Last 4 digits of account number	8248	\$5,188.00
	Nonpriority Creditor's Name	-		. ,
	Po Box 15298	When was the debt incurred?	Opened 4/01/08	-
	Wilmington, DE 19850 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	g plans, and other similar debts	
	□ Yes	■ Other Specify Credit Card		
	00	- Other. Specify		-
4.9	Chicago Eye Consultants Nonpriority Creditor's Name	Last 4 digits of account number		\$298.51
	4401 S. Harlem Ave Berwyn, IL 60402	When was the debt incurred?		-
-	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify Medical Bill	3	-
4.1				A 4 000 00
0	Christ Hospital & Medical Center Nonpriority Creditor's Name	Last 4 digits of account number		\$1,300.00
	4440 W. 95th St.	When was the debt incurred?		
	Oak Lawn, IL 60453			-
-	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	report as priority claims Debts to pension or profit-sharir	o plans, and other similar debts	
	_	·		
	☐ Yes	■ Other. Specify Medical Bill	5	-

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	or 2 Maria Lekarczyk		Case number (if know)	
4.1	Citibank	Last 4 digits of account number	8332	\$1,342.00
	Nonpriority Creditor's Name Po Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	Opened 12/17/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.1	Citibank na Nonpriority Creditor's Name	Last 4 digits of account number	1479	\$865.00
	Po Box 6497 Sioux Falls, SD 57117	When was the debt incurred?	Opened 11/10/14	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l alaim.	
	☐ At least one of the debtors and another	Student loans	i Claiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.1	Citibank na Nonpriority Creditor's Name	Last 4 digits of account number	7657	\$789.00
	Po Box 6497	When was the debt incurred?	Opened 10/17/14	
	Sioux Falls, SD 57117			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc	ount	

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	or 2 Maria Lekarczyk	Case nun	nber (if know)	
4.1 4	Cmre	Last 4 digits of account number 3796		\$172.00
	Nonpriority Creditor's Name 3075 E Imperial Hwy Brea, CA 92821	When was the debt incurred? Opened	d 4/25/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check al	I that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agree report as priority claims	ement or divorce that you did not	
	■ No	Debts to pension or profit-sharing plans, and		
	Yes	■ Other. Specify Collection MacNeal	Hospital	
4.1 5	Comenity Bank/Dress Barrn Nonpriority Creditor's Name	Last 4 digits of account number 9851		\$1,094.00
	Po Box 182789 Columbus, OH 43218	When was the debt incurred? Opened	d 4/26/10	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check al	I that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agree report as priority claims	ement or divorce that you did not	
	■ No	Debts to pension or profit-sharing plans, and	d other similar debts	
	Yes	Other. Specify Charge Account		
4.1 6	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number 2643		\$1,565.00
	Po Box 15316 Wilmington, DE 19850	When was the debt incurred? 2012		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check al	I that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agree report as priority claims	ement or divorce that you did not	
	■ No	Debts to pension or profit-sharing plans, and	d other similar debts	
	Yes	Other. Specify Credit Card		

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	2 Maria Lekarczyk		Case number (if know)	
4.1 7	Fifth Third Bank	Last 4 digits of account number	1750	\$3,594.00
	Nonpriority Creditor's Name 5050 Kingsley Dr Cincinnati, OH 45227	When was the debt incurred?	Opened 4/24/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	□ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.1	First Premier Bank	Last 4 digits of account number	1665	\$797.00
	Nonpriority Creditor's Name 601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 11/18/14	
•	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	_		
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify Credit Card		
4.1			Various	
9	Heart Care Centers of Illinois Nonpriority Creditor's Name	Last 4 digits of account number	accounts	\$1,915.00
	PO Box 766 Bedford Park, IL 60499-0766	When was the debt incurred?		-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	O continuent		
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	■ Other Specify Medical serv	vices	
		- Other Opeony		-

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	1 Taduesz Lekarczyk 2 Maria Lekarczyk		Case number (if know)	
4.2 0	Illinois Collection Services	Last 4 digits of account number	6751	\$210.00
	Nonpriority Creditor's Name 8231 185th St Suite 100 Tinley Park, IL 60487	When was the debt incurred?	Opened 4/02/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Collection	Heart Care Center	
4.2	Illinois Collection Services Nonpriority Creditor's Name	Last 4 digits of account number	9669	\$125.00
	8231 185th St Suite 100 Tinley Park, IL 60487	When was the debt incurred?	Opened 5/02/13	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection H	eart Care Center	
4.2	Illinois Collection Services Nonpriority Creditor's Name	Last 4 digits of account number	3477	\$101.00
	8231 185th St Suite 100	When was the debt incurred?	Opened 8/31/12	
	Tinley Park, IL 60487 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	ls the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	■ Other. Specify Collection F	Heart Care Center	

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	Maria Lekarczyk		Case number (if know)	
4.2			0000	#04.00
3	Illinois Collection Services Nonpriority Creditor's Name	Last 4 digits of account number	3689	\$64.00
	8231 185th St Ste 100	When was the debt incurred?	Opened 5/31/13	
-	Tinley Park, IL 60487 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Oncok all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	_	Debts to pension or profit-sharir	a plane, and other similar debts	
	■ No	·	•	
	Yes	Other. Specify Collection	Heart Care Center	-
4.2	LTD Financial Convince			\$0.00
4	LTD Financial Services Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	7322 Southwest Freeway Suite 1600	When was the debt incurred?		-
	Houston, TX 77074			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	■ Other. Specify Collection		
	Lvnv Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	8821	\$792.00
	Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 2/16/15	-
-	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify N.A.	ompany Account Credit One Bank	

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	1 Taduesz Lekarczyk 2 Maria Lekarczyk	Case number (if know)	
4.2	Mabt/Contfin	Last 4 digits of account number 5933	\$705.00
	Nonpriority Creditor's Name 121 Continental Dr Ste 1 Newark, DE 19713	When was the debt incurred? Opened 12/09/14	_
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	_
4.2	Macneal Health Network	Last 4 digits of account number 5780	\$4,740.65
	Nonpriority Creditor's Name 2384 Paysphere Circle Chicago, IL 60674-2384	When was the debt incurred?	_
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	_
4.2	Mbb Nonpriority Creditor's Name	Last 4 digits of account number 4211	\$257.00
	1460 Renaissance Dr	When was the debt incurred? Opened 1/26/15	_
	Park Ridge, IL 60068 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection Midwest Anesthesia	_

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	or 2 Maria Lekarczyk	Case number (if know)	
4.2 9	Midland Funding	Last 4 digits of account number 6715	\$3,121.00
	Nonpriority Creditor's Name 2365 Northside Dr Suite 30 San Diego, CA 92108	When was the debt incurred? Opened 8/21/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Factoring Company Account Synchrony Bank	
4.3 0	Midwest Diagnostic Pathology	Last 4 digits of account number	\$536.00
	Nonpriority Creditor's Name PO Box 578 Park Ridge, IL 60068	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection	
4.3 1	Millennia Patient Services Nonpriority Creditor's Name	Last 4 digits of account number 4085	\$1,033.00
	PO Box 105138 Atlanta, GA 30348	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Medical Bills	
	□ 162	Other. Specify	

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Nonpriority Creditor's Name 120 Corporate Blvd Suite 1 When was the debt incurred? Opened 10/21/15 Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Factoring Company Account Citibank N.A. ☐ Yes

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1	Taduesz Lekarczyk	J	
Debtor 2	Maria Lekarczyk		Case number (if know)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	52,708.22
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	52,708.22
				L	

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		Docume	TIL FAUC 33 UT UZ	
Fill in this infor	mation to identify your	case:		
Debtor 1	Taduesz Lekarczy	k		
	First Name	Middle Name	Last Name	
Debtor 2	Maria Lekarczyk			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(II KIIOWII)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number,	whom you have the Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	Ony		Oldio	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	,				
	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	<u> </u>

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		Docume	ent Page 34 d	of 62	
Fill in this	information to identify your	case:			
Debtor 1	Taduesz Lekarczy	k			
	First Name	Middle Name	Last Name		
Debtor 2	Maria Lekarczyk				
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	hor				
(if known)	Dei			☐ Check if this is an	
				amended filing	
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors		12/1	5
our name	nd number the entries in the and case number (if known)	. Answer every question		o this page. On the top of any Additional Pages, writes as a codebtor.	e
1. 50	you have any codebiors: (ii	you are ming a joint case, t	do not list citrici spouse	as a codebior.	
■ No					
☐ Yes	3				
Arizon	hin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3.			y? (Community property states and territories include ington, and Wisconsin.)	
☐ Yes	s. Did your spouse, former spouse	use, or legal equivalent live	e with you at the time?		
in line Form out Co	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	rif your spouse is filing with you. List the person shoure you have listed the creditor on Schedule D (Off 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the de	icial to fil
	Name, Number, Street, City, State and Z	P Code		Check all schedules that apply:	;DL
3.1	Name			☐ Schedule D, line	
	rano			☐ Schedule E/F, line	
_				Scriedule G, line	
	Number Street	Stata	ZIP Code		
,	City	State	ZIP Code		
				_	
3.2	Name			Schedule D, line	
	IVALITO			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street	Stato	ZID Codo		
	City	State	ZIP Code		

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Fill	in this information to identify your o	ase:										
Del	btor 1 Taduesz Leł	Taduesz Lekarczyk										
1	btor 2 Maria Lekaro	_										
Uni	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS									
	se number nown)		-			□ A		d filing ent showing	g postpetition llowing date:			
0	fficial Form 106I					N	IM / DD/ Y	YYY				
S	chedule I: Your Inc	ome								12/1		
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment Fill in your employment	ur spouse is not filing wi On the top of any additi	ith you, do not inclu	de infor	mati	ion about	your spo	use. If mo	re space is	needed,		
	information.		Debtor 1	Debtor 1				Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional	Employment status	Employment status Employed Not employed			☐ Employed ■ Not employed						
	employers.	Occupation	Retired				Retired					
	Include part-time, seasonal, or self-employed work.	Employer's name										
	Occupation may include student or homemaker, if it applies.	Employer's address										
		How long employed t	here?									
Pa	rt 2: Give Details About Mo	nthly Income										
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Incl	ude your no	n-filing		
If yo	ou or your non-filing spouse have m e space, attach a separate sheet to	ore than one employer, co	ombine the informatio	n for all e	empl	oyers for	that perso	n on the lin	es below. If	you need		
						For Del	otor 1	For Deb	tor 2 or ng spouse			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	0.00			
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	0.00			
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$		0.00	\$	0.00			

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Debto Debto		Taduesz Lekarczyk Maria Lekarczyk	_	C	ase number (<i>if kn</i>	own)				
					For Debtor 1			For Debtor 2 or non-filing spouse		
(Сор	y line 4 here	4.	,	\$C	.00	\$		0.00	
5. I	List	all payroll deductions:								
	ōа.	Tax, Medicare, and Social Security deductions	5a.	9	\$ 0	.00	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b.		: — <u> </u>	0.00	\$_		0.00	
	5с.	Voluntary contributions for retirement plans	5c.		: 	0.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d.		ː	.00	\$-		0.00	
	5е.	Insurance	5e.		·	0.00	<u>\$</u> —		0.00	
	5f.	Domestic support obligations	5f.		·	0.00	\$		0.00	
	5g.	Union dues	5g.		Ť	.00	<u>\$</u> —		0.00	
	5h.	Other deductions. Specify:	5h		·	.00	+ \$		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$.00	\$		0.00	
7. (Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	S	.00	\$		0.00	
	L ist Ba.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	9	 \$ 0	0.00	\$		0.00	
8	3b.	Interest and dividends	8b.	,	\$C	.00	\$		0.00	
	3c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	t 8c.			0.00	\$		0.00	
8	3d.	Unemployment compensation	8d.			.00	\$		0.00	
8	Зe.	Social Security	8e.	,	\$1,760	.00	\$	6	36.00	
	Bf.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.			0.00	\$		0.00	
	3g.	Pension or retirement income	8g.		\$ 1,604		. * —		0.00	
•	3h.	Other monthly income. Specify:	8h	+ ;	\$C	.00	+ • —		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,364	.00	\$		636.00)
10	Calc	culate monthly income. Add line 7 + line 9.	10. \$:	3,364.00	+ ¢	6	36.00 =	\$	4,000.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	' —	3,304.00	. _		-	-	4,000.00
11.	Stat nclu othe Do r	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	deper				•	chedule .		0.00
'		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaies						12.	\$	4,000.00
13. I	Do y	ou expect an increase or decrease within the year after you file this form	1?						Combin nonthly	ed / income
Ï		Yes. Explain:								

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						_		
Fill	in this informa	tion to identify y	our case:					
Deb	otor 1	Taduesz Lek	arczyk			Chec	k if this is:	
							An amended filing	
	otor 2	Maria Lekard	zyk					wing postpetition chapter the following date:
(Spo	ouse, if filing)						13 expenses as or	the following date:
Unit	ted States Bankr	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS	_	MM / DD / YYYY	
	se numbe r nown)							
0	fficial Fo	rm 106J						
		J: Your	Evner	1606				12/15
				ISCS . If two married people ar	a filing together b	oth ore equi	ally roonancible fo	
info	ormation. If m		eded, atta	ch another sheet to this				
Par		ribe Your House	ehold					
1.	Is this a joir	nt case?						
	☐ No. Go to	line 2.						
	■ Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N □ Y	-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.	
2	De veu bev	a damandanta?						
2.	•	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
					-			☐ Yes
								□ No □ Yes
								□ Yes
								☐ Yes
3.	Do your exp	enses include		No				- 103
		f people other t d your depende	than 👝	Yes				
	yoursen an	a your depende	mis r					
		ate Your Ongo		, .				
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of sucl ficial Form 10		d have inc	cluded it on Schedule I:)	our Income		Your exp	enses
4.		or home owners and any rent for th		ses for your residence. In	nclude first mortgage	e 4. \$		1,170.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	4b. Prope	rty, homeowner'	s, or renter	's insurance		4b. \$		0.00
				ipkeep expenses		4c. \$		150.00
_		owner's associa		dominium dues our residence, such as ho	ma aguite les	4d. \$ 5. \$		0.00
:)	ACCIDIONALI	norioade paym	- ms ror vc	uu residence, such as no	me econy idans	2 7		11 (11)

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ebtor 1		sz Lekarczyk			
ebtor 2	² Maria	_ekarczyk	ase num	ber (if known)	
	ilities:	ity hoot natural soc	60	¢.	200.00
6a.		ity, heat, natural gas	6a.	\$	300.00
6b.		sewer, garbage collection	6b.	\$	60.00
6c.		one, cell phone, Internet, satellite, and cable services	6c.	·	150.00
6d.			_ 6d.	*	0.00
		usekeeping supplies	7.	\$	400.00
_		d children's education costs	8.	\$	0.00
	•	ndry, and dry cleaning	9.	\$	100.00
		e products and services	10.	\$	50.00
		dental expenses	11.	\$	70.00
		on. Include gas, maintenance, bus or train fare.	12.	\$	300.00
		nt, clubs, recreation, newspapers, magazines, and books	13.	\$	40.00
		ontributions and religious donations	14.	· ·	10.00
		mulbations and rengious donations	14.	Ψ	10.00
	surance.	e insurance deducted from your pay or included in lines 4 or 20.			
	a. Life ins		15a.	\$	0.00
	b. Health		15b.		617.00
	c. Vehicle	· · · · · · · · · · · · · · · · · · ·	15c.	· -	200.00
			15d.	·	
		nsurance. Specify:	_ 15u.	Φ	0.00
	xes. Do no ecify:	t include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	,	r lease payments:			0.00
		ments for Vehicle 1	17a.	\$	360.00
17t	b. Carpay	ments for Vehicle 2	17b.	\$	0.00
	c. Other.		17c.	\$	0.00
	d. Other.		17d.	*	0.00
		ats of alimony, maintenance, and support that you did not report as			0.00
		m your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
		nts you make to support others who do not live with you.		\$	0.00
	ecify:		19.		
. Oth	her real pr	operty expenses not included in lines 4 or 5 of this form or on Schedu	le I: Yo	our Income.	
20a	a. Mortga	ges on other property	20a.	\$	0.00
20b	b. Real es	tate taxes	20b.	\$	0.00
200	c. Propert	y, homeowner's, or renter's insurance	20c.	\$	0.00
200	d. Mainter	nance, repair, and upkeep expenses	20d.	\$	0.00
		wner's association or condominium dues	20e.	\$	0.00
Oth	her: Specif	v:	21.	+\$	0.00
			_	,	0.00
		ur monthly expenses			
		s 4 through 21.		\$	3,977.00
22t	b. Copy line	e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	c. Add line	22a and 22b. The result is your monthly expenses.		\$	3,977.00
Cal	lculate ve	ur monthly net income.			
		ne 12 (your combined monthly income) from Schedule I.	23a.	\$	4 000 00
		our monthly expenses from line 22c above.	23a. 23b.		4,000.00
231	о. Сору у	our monuny expenses normane 220 above.	۷۵۵.	-ψ	3,977.00
230	c. Subtrac	et your monthly expenses from your monthly income.			
_00		ult is your monthly net income.	23c.	\$	23.00
		,			
		ct an increase or decrease in your expenses within the year after you t			
		o you expect to finish paying for your car loan within the year or do you expect your mo he terms of your mortgage?	ortgage	payment to increase	or decrease because of a
_		ne temis or your mortgage:			
	No.	[=			
	Yes.	Explain here:			

Fill in this in	formation to identify your	case:			
Debtor 1	Taduesz Lekarczy	k			
	First Name	Middle Name	Last Name	_	
Debtor 2	Maria Lekarczyk				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case numbe	r				
(if known)					☐ Check if this is an
					amended filing
Official F	orm 106Dec				
		n Individua	Debtor's Sch	ealuber	12/15
Boolai	ation About a		Dester 5 cor	icaaico	12/13
f two marrie	d people are filing togethe	r. both are equally respo	onsible for supplying corre	ect information.	
		, , ,	, 0		
					ent, concealing property, or
			kruptcy case can result in	fines up to \$250,000,	or imprisonment for up to 20
years, or bot	h. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
,	Sign Below				
Did you	ı pay or agree to pay some	one who is NOT an atto	rney to help you fill out ba	nkruptcy forms?	
•	., .		, ,,	. ,	
■ No)				
☐ Ye	s. Name of person			Attach Bankru	ptcy Petition Preparer's Notice,
				Declaration, a	nd Signature (Official Form 119)
Under p	enalty of perjury, I declare	that I have read the sun	nmary and schedules filed	with this declaration	and
	y are true and correct.		•		
X /e/ T	Faduesz Lekarczyk		X /s/ Maria Lek	rarczyk	
	luesz Lekarczyk		Maria Lekard		
	nature of Debtor 1		Signature of D		
_			- -		
Date	May 5, 2016		Date May 5	5, 2016	

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Fill	in this infor	mation to identify you	r case:			
	tor 1	Taduesz Lekarcz				
		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	Maria Lekarczyk First Name	Middle Name	Last Name		
` '	, 0,		NORTHERN DISTRICT (
Unit	ed States Ba	inkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Cas (if kno	e number _				_	heck if this is an mended filing
Sta	atement			duals Filing for B		4/16
infor	mation. If n		attach a separate sheet to		equally responsible for supply additional pages, write you	
Par	Give I	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	■ Married					
2.	During the	ast 3 vears, have vou	lived anywhere other than	where you live now?		
	_	,,	,			
	■ No □ Yes. Lis	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. M	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Part	Expla	in the Sources of You	r Income			
	Fill in the tot	al amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including partetogether, list it only once ur		dar years?
	□ No ■ Yes. Fi	ll in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until ed for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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	btor 1 btor 2		duesz Lek ria Lekaro	•			Cas	e number (if known)		
					51/			211		
					Sources of income Check all that apply.	(befo	es income re deductions and sions)	Sources of inconcheck all that a		Gross income (before deductions and exclusions)
			dar year: December	31, 2015)	■ Wages, commissions, bonuses, tips		\$29,240.00	☐ Wages, combonuses, tips	missions,	\$0.00
					Operating a business			Operating a l	business	
			lar year be December	efore that: 31, 2014)	■ Wages, commissions, bonuses, tips		\$53,288.00	☐ Wages, combonuses, tips	missions,	\$0.00
					Operating a business			Operating a l	business	
	winnii	ngs. Ì ach s No	f you are fi	ling a joint cas	pensions; rental income; inte e and you have income that me from each source separa	you rece	ived together, list it o	only once under De	ebtor 1.	a gambiing and lottery
					Debtor 1			Debtor 2		
					Sources of income Describe below.	each (befo	s income from source re deductions and sions)	Sources of incontrol Describe below.		Gross income (before deductions and exclusions)
			1 of curre led for ba	nt year until nkruptcy:	SSI Benefits		\$11,980.00			
					Retirement Income		\$8,020.00			
Pa	rt 3:	List	Certain Pa	ayments You	Made Before You Filed for	· Bankruı	otcy			
6.	_		Neither D individual	ebtor 1 nor D primarily for a 90 days befo Go to line 7	Is debts primarily consume bettor 2 has primarily cons personal, family, or househouse we you filed for bankruptcy, of the consumer of the primary of the part of the primary of the prima	sumer de old purpo did you pa	bts. Consumer debtese." ay any creditor a tota	ıl of \$6,425* or mor	re?	
				paid that cre not include	editor. Do not include payme payments to an attorney for ton 4/01/19 and every 3 yea	ents for do this bank	omestic support oblig ruptcy case.	gations, such as ch	ild support a	nd alimony. Also, do
	.	Yes.	Debtor 1	or Debtor 2 o	r both have primarily cons	umer del	bts.		,	•
			_	·	re you filed for bankruptcy, o	aid you pa	ay any creditor a tota	ii oi \$600 oi moie?		
			■ No.	Go to line 7						
			□ Yes	include pay	each creditor to whom you pa ments for domestic support this bankruptcy case.					
	Cred	ditor's	s Name an	d Address	Dates of paym	ent	Total amount	Amount you	Was this p	payment for

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Debto	or 2 Maria Lekarczyk		Cas	se number (if known)		
li o a	Nithin 1 year before you filed for bankrup Insiders include your relatives; any general possible of which you are an officer, director, person a business you operate as a sole proprietor. alimony.	partners; relatives of any gen in control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	I partner; corporation gent, including one fo
	■ No □ Yes. List all payments to an insider.					
I	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
ir	Nithin 1 year before you filed for bankrup nsider? nclude payments on debts guaranteed or co		yments or transfer a	any property on a	ccount of a de	ebt that benefited an
	■ No □ Yes. List all payments to an insider					
ı	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment tor's name
Part 4	4: Identify Legal Actions, Repossessi	ons, and Foreclosures				
L	Nithin 1 year before you filed for bankrup List all such matters, including personal injuit modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
	Nithin 1 year before you filed for bankrup Check all that apply and fill in the details bel		erty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied?
	No. Go to line 11. Yes. Fill in the information below.					
(Creditor Name and Address	Describe the Property		Date		Value of the property
44 14	All the CO described and a second file of the best bounded	Explain what happene				
	Within 90 days before you filed for banknaccounts or refuse to make a payment be No		cluding a bank or fil	ianciai institutior	i, set on any a	mounts from your
(☐ Yes. Fill in the details. Creditor Name and Address	Describe the action th	e creditor took		action was	Amount
	Nithin 1 year before you filed for bankrup court-appointed receiver, a custodian, or		erty in the possess	taker		fit of creditors, a
	■ No □ Yes					
Part 5	5: List Certain Gifts and Contributions	s				
	Nithin 2 years before you filed for bankru No	uptcy, did you give any gif	ts with a total value	of more than \$60	0 per person?	
(☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	0 Describe the gifts	3	Date: the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

Taduesz Lekarczyk

Debtor 1

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	otor 2 Maria Lekarczyk			Case number	(if known)	
14	Within 2 years before you filed for bankru	ntcv d	lid you give any gifts or contribution	s with a tota	l value of more than	\$600 to any charity?
14.	No	picy, c	ind you give any gifts of contribution	is with a tota	i value of more triali	pood to arry criarity:
	Yes. Fill in the details for each gift or cor	ntributi	on.			
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster,
	■ No					
	■ No □ Yes. Fill in the details.					
	— 100. Till ill dotallo.	Dogori	he any incurence coverage for the la	200	Data of your	Value of property
	how the loss occurred		be any insurance coverage for the lo the amount that insurance has paid. L		Date of your loss	Value of property lost
			ce claims on line 33 of Schedule A/B:			
Par	t 7: List Certain Payments or Transfers					
	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or pr Include any attorneys, bankruptcy petition pre	reparir	g a bankruptcy petition?			ty to anyone you
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	MI	Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
	Worwag & Malysz, P.C. The Peoples Advocates 2500 E. Devon Ave #300 Des Plaines, IL 60018 mjworwag@gmail.com	,	Attorney Fees \$1,300			\$650.00
	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	tors o	to make payments to your creditors		or transfer any proper	rty to anyone who
	■ No					
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers rinclude gifts and transfers that you have already	busin made a	ess or financial affairs? as security (such as the granting of a se			
	No					
	Yes. Fill in the details.		Barantatan and t	D		Data than 1
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you					

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Debtor 1 Taduesz Lekarczyk Debtor 2 Maria Lekarczyk

Case number (if known)

 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 					of which you are a	
	Name of trust Description and value of the property transferred					
	Name of trust	Description and v	alue of the pro	perty trans	sierreu	Date Transfer was made
Par	tt 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and S	torage Unit	s	
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, clossold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, broker nouses, pension funds, cooperatives, associations, and other financial institutions. No					
	Yes. Fill in the details.					
		ast 4 digits of ccount number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	ny safe de _l	oosit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your	home within 1	l year befoi	re you filed for bankrupto	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Par	rt 9: Identify Property You Hold or Control for	r Someone Else				
23.			ude any prope	rty you bor	rowed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	rt 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface	e water, groun			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	•	environmental	law, wheth	er you now own, operate	, or utilize it or used
	 Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. 					

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Taduesz Lekarczyk Debtor 2 Maria Lekarczyk

Case number (if known)

24.	_		you may be liable or potentially liable	unc	der or in violation of an environme	ental law?		
	■ No	os. Fill in the details.						
	Name	of site SS (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		
25.	Have y	ou notified any governmental unit of	any release of hazardous material?					
	■ No	o es. Fill in the details.						
		of site SS (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		
26.	Have y	ou been a party in any judicial or adm	ninistrative proceeding under any envi	ironr	mental law? Include settlements a	and orders.		
	■ No	o es. Fill in the details.						
	Case I	Title Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
Par	t 11:	Give Details About Your Business or 0	Connections to Any Business					
27.	Within	4 years before you filed for bankrupte	cy, did you own a business or have an	ny of	the following connections to any	/ business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
		An officer, director, or managing exe	ecutive of a corporation					
		An owner of at least 5% of the voting	g or equity securities of a corporation					
	■ No	o. None of the above applies. Go to P	art 12.					
	□ Ye	es. Check all that apply above and fill	in the details below for each business	s.				
	Busine Addre	ess Name	Describe the nature of the business		Employer Identification number			
		r, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN. Dates business existed			
		2 years before you filed for bankrupto ions, creditors, or other parties.	cy, did you give a financial statement t	to ar	nyone about your business? Inclu	ude all financial		
	■ No	o es. Fill in the details below.						
	Name Addre	SS r, Street, City, State and ZIP Code)	Date Issued					
	(Hullibe	, onest, oity, state and AIF code)						

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Debtor 1 Taduesz Lekarczyk		•
Debtor 2 Maria Lekarczyk		Case number (if known)
Part 12: Sign Below		
I have read the answers on this Stateme	nt of Financial Affairs ar	nd any attachments, and I declare under penalty of perjury that the answers
		t, concealing property, or obtaining money or property by fraud in connection
with a bankruptcy case can result in fine	es up to \$250,000, or imp	prisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.		
/s/ Taduesz Lekarczyk	/s/ Ma	aria Lekarczyk
Taduesz Lekarczyk	Maria	a Lekarczyk
Signature of Debtor 1	Signat	ture of Debtor 2
Date May 5, 2016	Date	May 5, 2016
Did you attach additional pages to Your	Statement of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did you pay or agree to pay someone wl	ho is not an attorney to I	help you fill out bankruptcy forms?
■ No		
☐ Yes. Name of Person . Attach the	e Bankruptcy Petition Prep	parer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:		
Debtor 1	Taduesz Lekarczy			
	First Name	Middle Name	Last Name	
Debtor 2	Maria Lekarczyk			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
(if known)				☐ Check if this is ar amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Toyota Motor Credit name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of Automobile property securing debt:	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's Toyota Motor Credit name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of 2013 Toyota Corolla property securing debt:	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's Wells Fargo Hm Mortgag name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□No
Description of FHA Real Estate Mortgage property	■ Retain the property and enter into a <i>Reaffirmation Agreement</i>.□ Retain the property and [explain]:	■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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	btor 1 Taduesz Lekarczyk btor 2 Maria Lekarczyk		
8	securing debt:		
	Creditor's Wells Fargo Home Mortgage name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□No
þ	Description of 5325 W. 89th St. Oak Lawn, IL 60453 Cook County securing debt:	■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■ Yes
For in th	List Your Unexpired Personal Property Leases any unexpired personal property lease that you listed in einformation below. Do not list real estate leases. Une may assume an unexpired personal property lease if the state of the	expired leases are leases that are still in effect	; the lease period has not yet ended.
Des	scribe your unexpired personal property leases		Will the lease be assumed?
	ssor's name: scription of leased		□ No
	pperty:		☐ Yes
	ssor's name:		□ No
	scription of leased perty:		☐ Yes
Les	ssor's name:		□ No
	scription of leased operty:		☐ Yes
ا ۵	ssor's name:		□ No
Des	scription of leased operty:		_
			☐ Yes
Lessor's name: Description of leased			□ No
Pro	pperty:		☐ Yes
	ssor's name: scription of leased		□ No
	pperty:		☐ Yes
	ssor's name:		□ No
	scription of leased operty:		☐ Yes
Par	rt 3: Sign Below		
Und	ler penalty of perjury, I declare that I have indicated my perty that is subject to an unexpired lease.	intention about any property of my estate that	t secures a debt and any personal
X	/s/ Taduesz Lekarczyk	X /s/ Maria Lekarczyk	
	Taduesz Lekarczyk Signature of Debtor 1	Maria Lekarczyk Signature of Debtor 2	
	Date May 5, 2016	Date May 5, 2016	

Official Form 108

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-16791 Doc 1 Filed 05/18/16 Entered 05/18/16 15:30:58 Desc Main Document Page 53 of 62

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

	Taduesz Lekarczyk			
In r	Maria Lekarczyk	D1(()	Case No.	7
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPI	ENSATION OF ATTORN	NEY FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	16(b), I certify that I am the attorney ling of the petition in bankruptcy, or	for the above nam agreed to be paid	ned debtor(s) and that to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,300.00
	Prior to the filing of this statement I have receive			650.00
			\$	650.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed con	npensation with any other person un	less they are meml	pers and associates of my law firm.
 6. 	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 			
	adversary proceeding.			
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	CERTIFICATION any agreement or arrangement for pa	syment to me for re	epresentation of the debtor(s) in
1	May 5, 2016	/s/ Michael J. Worwa	g	
	Date	Michael J. Worwag Signature of Attorney Worwag & Malysz, P The Peoples Advoca 2500 E. Devon Ave # Des Plaines, IL 6001 847.954.2350 Fax: 8 mjworwag@gmail.co Name of law firm	.C. tes ⊭300 8 847.954.2755	

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WORWAG & MALYSZ, P.C.

adba The Peoples Advocates www.worwagmalyszlaw.com

2500 E. Devon Ave #300 Des Plaines, Illinois 60018 Phone: 847.533.3303 Email: mjworwag@gmail.com 10135 S. Roberts Rd. #205 Palos Hill, Illinois 60465 Phone: 773.586.4010 Fax:847.954.2755

Retainer for Legal Services

Chapter 7- Eliminates dischargeable unsecured debts. Certain debts may not be dischargeable.
+\$70.00 cc

Your fee for our services is $$\frac{\sqrt{300}}{}$. This is a "flat fee" of which half is for services rendered prior to your case being filed and the other half is for services rendered after your case is filed. Any portion of the retainer not earned will be refunded to you.

Today you paid \$______.

You agree to pay the balance of \$_____ by the date of the trustee meeting.

Filing Fee- You will also provide a separate payment for \$335.00. The \$335 filing fee is a separate cost and is not included in the fee that you were quoted for our services and must be paid before we file.

This agreement will serve as an engagement agreement that will establish the terms of our relationship. When you sign it, it will become a contract between us. In passing the Bankruptcy Abuse Prevention and Consumer Protection Act of 2005, the Congress imposed strict requirements upon attorneys representing debtors, requiring them to specify what duties they will perform and to make certain representations to clients. Those specific duties and representations are set out in the representation agreement. Please read this agreement carefully and be sure you understand it. If you have any questions, you should consult with me before signing. Once you are satisfied with the agreement, please sign and return a copy to me. The following are the specifics of our proposed representation. We will:

- Meet with you to discuss your financial situation and possible solutions;
- 2. Provide the section 342(b)(1) notice, which sets out the purpose, benefits, and costs of filing under Chapters 7, 11, 12 or 13; the types of services available from credit counseling agencies; and the penalties of committing certain bankruptcy crimes, and will explain the notice to you;
- 3. Prepare the necessary bankruptcy petition, schedules, statement of affairs, and other documents, and review and file the bankruptcy case under the chapter you select;
- 4. Prepare for and accompany you to the section 341 first meeting of creditors;
- Assist in the amendments to the papers filed and the production of such documents as the trustee requests;
- 6. Assist you in the negotiation and execution of reaffirmation agreements that are in your best interest and meet all requirements of the law.

FULL DISCLOSURE- You agree that you will fully disclose all financial information. You agree to disclose ALL of your assets, debts and income and understand that it is a Federal crime to omit any other information from your bankruptcy petition punishable by fine of up to \$500,000 or imprisonment for up to 5 years or both. You also agree to provide our office with proof of your income for the last six months and your tax returns for the previous two (2) years.

→FINANACIAL MANANGEMENT AND CREDIT COUNSELING COURSES- Under the new law you are required to take a Credit Counseling Course prior to the filing of your bankruptcy petition and a Financial Management Course prior to the discharge of your bankruptcy for an

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ADDITITONAL FEE (usually no more than \$100). If you fail to complete these courses your bankruptcy will be denied.

Attached are notices and information I am required to give you by law. Please read all information.

Debt Relief Agency Disclosures to an Assisted Person

Section 527 of the Bankruptcy Code requires a Debt Relief Agency to provide an assisted person with the following:

- 1. A copy of the notice prepared by the clerk of the Bankruptcy Court, in accordance with the requirements of § 342(b), which is attached hereto and which contains:
 - (1) a brief description of
 - (A) Chapters 7, 11, 12, and 13 and the general purpose, benefits, and costs of proceeding under each of those chapters; and
 - (B) the types of services available from credit counseling agencies; and
 - (2) statements specifying that
 - (A) a person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury in connection with a case under this title shall be subject to fine, imprisonment, or both; and
 - (B) all information supplied by a debtor in connection with a case under this title is subject to examination by the Attorney General.
- 2. The following disclosures are required by § 527(a)(2), which advises an assisted person that:
 - (A) all information that the assisted person is required to provide with a petition and thereafter during a case under this title is required to be complete, accurate, and truthful;
 - (B) all assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case, and the replacement value of each asset as defined in § 506 must be stated in those documents where requested after reasonable inquiry to establish such value;
 - (C) current monthly income, the amounts specified in section 707(b)(2), and, in a case under Chapter 13 of this title, disposable income (determined in accordance with § 707(b)(2)) are required to be stated after reasonable inquiry; and
 - (D) information that an assisted person provides during his or her case may be audited pursuant to this title, and failure to provide such information may result in dismissal of the case under this title or other sanction, including a criminal sanction.

If you have any questions about any of these disclosures, we will be happy to provide further explanation.

We also call your attention to Exhibits A and B attached to the Representation and made a part thereof.

EXHIBIT A

Separate Disclosure Required by Section 527 of the Bankruptcy Code as Amended

IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY

(Note: This form is mandated by statute. It may or may not correctly explain the law.)

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. The law requires an attorney or bankruptcy petition preparer to give you a written contract specifying what the attorney or bankruptcy petition preparer will do for you and how much it will cost. Ask to see the contract before you hire anyone.

The following information explains what must be done in a routine bankruptcy case to help you evaluate how much service you need. Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and decide which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents (Petition, Schedules, Statement of Financial Affairs, and in some cases a Statement of Intention) must be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you must attend the required first meeting of creditors, where you may be questioned by a court official called a "trustee" and by creditors.

If you choose to file a Chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a Chapter 13 case, in which you repay your creditors what you can afford over 3 to 5 years, you may also want help preparing your Chapter 13 plan and with the confirmation hearing on your plan, which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than Chapter 7 or Chapter 13, you should consult someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only lawyers, not bankruptcy petition preparers, can give you legal advice.

Client hereby acknowledges receipt of a copy of this disclosure.

EXHIBIT B

<u>Information to the Assisted Person (Debtor) on How to Provide All Information Required</u> by Section 521

Section 521 of the Code sets out the Debtor's duties related to the filing of a bankruptcy case. A copy of the section is attached to this writing.

As you fill out these schedules and statement of affairs, you should keep the following in mind:

- 1. Completing the income and expense pages accurately and completely is critical.
 - (a) To compile your income, refer to recent pay stubs and last year's income tax returns. Accounting for overtime, investment dividends, and other earnings is necessary.
 - (b) People usually pay cash for many items, such as groceries. Review your monthly expense payments and make a best estimate on cash expenditures. If you pay insurance annually, calculate the monthly cost. Attached are IRS expense allowances for the area in which you live. If your expenses exceed these, we will have to review them and perhaps make adjustments.
 - (c) When you value property you own, consider prices in the neighborhood for housing, in newspapers and car lots for automobiles, and what you would pay for furniture and clothes at a business selling such goods.
 - (d) If you have an item of special value, an appraisal may be necessary.
 - (e) When listing creditors, collect current bills and use that information for mailing addresses and balances due.
 - (f) Under the law of this state, or federal bankruptcy law, certain property may be exempt and may be retained. Attached is a copy of the state list of exemptions and also a list of property that may be exempt under federal law. Neither list is all-inclusive. If a seller has a lien on exempt property, the lien may be avoidable or you may have to pay for the property in order to keep it. After you have prepared these lists, we can review them and decide what property qualifies as exempt.

ADDITIONAL FEES- The *only* reason that you may be charged additional fees is a) *Failing to list debts* at time of filing that later have to be added to your bankruptcy documents. There is a \$100 charge to amend your petition, b) *Missing court date*. You must attend a meeting of creditors approximately 4 - 6 weeks after your case is filed. I still have to appear if you cannot, so there will be a \$150 additional fee for a missed court date. c) *Adversary objections* to discharge debts based on fraudulent use of credit cards or other dischargeability issues. Fee for litigating a dischargeability issue is \$200 per hour, five hours to be paid in advance if we decide to represent you. d) *Lien avoidance*. You agree that the above quoted fee does not include services provided to avoid judgment liens (\$200 per hour) and non-purchase money security interests (\$200 per hour). You understand and agree that if you do not pay the fee, I will not bring the motion and the lien will survive the bankruptcy. **Reaffirmations**- Once you reaffim a debt, you may only rescind the reaffirmation agreement by contacting our office no less than two weeks prior

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to the bar date for rescissions. You may only reaffirm a debt if it does not impose an undue hardship to you.

Secured Debts	Unsecured Debts	Non-Dischargeable
Nortgage Arrears		Tax
Nortgage Balance		Student Loans
Car Balance		Gov't Fines
.oans		Misc
T-4-10	Total Unsecured	Total Non-Disc \$

- Your most recent pay stubs from all employers, and records concerning your earnings for the past 6 months from all sources
- All bills from all creditors for the past 90 days so that we may determine the proper place to send notice.
- · All loan documents for all secured loans, including home loans and auto loans
- · Your social security card
- Your photo identification card
- · List of your household income and expenses
- Details concerning every item of property you own, including real estate and personal property
- Details concerning any litigation in which you involved now or in which you may be involved in the future.
- Information on any inheritance you may have received, expect to receive or trust as to which you are or may be a beneficiary
- Information on all insurance policies
 - Credit Counseling Certificate

I hereby acknowledge that I/We have read and reviewed this 5 page retainer/representation agreement and I/we understand all of its contents.

Client Date Client Date

Attorney on behalf of Worwag & Malysz, PC

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United States Bankruptcy Court Northern District of Illinois

In re	Taduesz Lekarczyk Maria Lekarczyk		Case No.		
		Debtor(s)	Chapter 7		
	VE	RIFICATION OF CREDITOR I	MATRIX		
		Number of Creditors:			
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of (our) knowledge.				
Date:	May 5, 2016	/s/ Taduesz Lekarczyk Taduesz Lekarczyk			
		Signature of Debtor			
Date:	May 5, 2016	/s/ Maria Lekarczyk			
		Maria Lekarczyk Signature of Debtor			

Advocate Christ Medical Center PO Box 3039 Hinsdale, IL 60522

Amex Po Box 297871 Fort Lauderdale, FL 33329

Archer Family Medical Group 6649 W. ARcher Ave Chicago, IL 60638

Bank Of America Po Box 982238 El Paso, TX 79998

Cach LLC 4340 S Monaco Second Floor Denver, CO 80237

Capital One Bank Usa 15000 Capital One Dr Richmond, VA 23238

Chase Card Po Box 15298 Wilmington, DE 19850

Chicago Eye Consultants 4401 S. Harlem Ave Berwyn, IL 60402

Christ Hospital & Medical Center 4440 W. 95th St. Oak Lawn, IL 60453

Citibank Po Box 6241 Sioux Falls, SD 57117

Citibank na Po Box 6497 Sioux Falls, SD 57117 Cmre 3075 E Imperial Hwy Brea, CA 92821

Comenity Bank/Dress Barrn Po Box 182789 Columbus, OH 43218

Discover Financial Po Box 15316 Wilmington, DE 19850

Fifth Third Bank 5050 Kingsley Dr Cincinnati, OH 45227

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

Heart Care Centers of Illinois PO Box 766 Bedford Park, IL 60499-0766

Illinois Collection Services 8231 185th St Ste 100 Tinley Park, IL 60487

LTD Financial Services 7322 Southwest Freeway Suite 1600 Houston, TX 77074

Lvnv Funding LLC Po Box 10497 Greenville, SC 29603

Mabt/Contfin 121 Continental Dr Ste 1 Newark, DE 19713

Macneal Health Network 2384 Paysphere Circle Chicago, IL 60674-2384 Mbb 1460 Renaissance Dr Park Ridge, IL 60068

Midland Funding 2365 Northside Dr Suite 30 San Diego, CA 92108

Midwest Diagnostic Pathology PO Box 578 Park Ridge, IL 60068

Millennia Patient Services PO Box 105138 Atlanta, GA 30348

Pnc Bank, N.A. 1 Financial Pkwy Kalamazoo, MI 49009

Portfolio Recovery Assoc 120 Corporate Blvd Suite 1 Norfolk, VA 23502

Toyota Motor Credit 1111 W 22nd St Ste 420 Oak Brook, IL 60523

Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701

Wells Fargo Home Mortgage 8480 Stagecoach Circle Frederick, MD 21701